USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF	COURT CASE NUMBER
REGINALD THADDEUS GILBERTBEY	CAE05-0069
DEFENDANT	TYPE OF PROCESS
UNITED STATES OF AMERICA, et al	SERVICE OF SUMMONS/PROCESS

SERVE AT
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN: UNITED STATES ATTORNEY
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code): C/O DEPARTMENT OF JUSTICE, 950 PENNSYLVANIA AVENUE, N.W. WASHINGTON, D.C. 20530

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

REGINALD T. GILBERTBEY
REG. NO. 03854-078
UNITED STATES PENITENTIARY ALLENWOOD
P.O. BOX 3000
WHITE DEER, PENNSYLVANIA 17887

Number of process to be served with this Form 285	
Number of parties to be served in this case	6
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold Fold

Signature of Attorney other Originator requesting service on behalf of:	☐ PLAINTIFF ☐ DEFENDANT	TELEPHONE NUMBER	DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (*Sign only for USM 285 if more than one USM 285 is submitted*)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No.	No.		

I hereby certify and return that I ☐ have personally served, ☑ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual , company, corporation, etc., at the address shown above on the on the individual , company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (*if not shown above*)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (*complete only different than shown above*)

Date: 2/21/06 Time: ☐ am ☐ pm

Signature of U.S. Marshal or Deputy: [signature]

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
$8.00			$8.00		$48.00

REMARKS: 2-9-06 9842 8030 6394

PRINT 5 COPIES:
1 CLERK OF THE COURT
2 USMS RECORD
3 NOTICE OF SERVICE
4 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

2. Article Number

7160 3901 9842 8020 6394

3. Service Type CERTIFIED MAIL

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

1. Article Addressed to:

UNITED STATES ATTORNEY
C/O DEPARTMENT OF JUSTICE
950 PENNSYLVANIA AVENUE, N.W.
WASHINGTON, D.C. 20530

5-69[illegible],0/S/C,2/9/06,SRB

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X FEB 21 2006

☐ Agent
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

PS Form 3811, January 2003 Domestic Return Receipt